

FINANCIAL AFFIDAVIT

CJA23
(Rev. 5/98)

IN SUPPORT OF REQUEST FOR ATTORNEY, EXPERT OR OTHER COURT SERVICES WITHOUT PAYMENT OF FEE

IN UNITED STATES
IN THE CASE OF MAGISTRATE DISTRICT APPEALS COURT or OTHER PANEL (Specify below)

USA vs. Ratliff

FOR

AT

FILE

LOCATION NUMBER

PERSON REPRESENTED (Show your full name)

Elvin Ratliff

CHARGE/OFFENSE (describe if applicable & check box →)

MAGISTRATE JUDGE
GERALDINE SOAT BROWN
UNITED STATES DISTRICT COURT
Felony Misdemeanor

MAR 06 2008

1 Defendant - Adult
 2 Defendant - Juvenile
 3 Appellant
 4 Probation Violator
 5 Parole Violator
 6 Habeas Petitioner
 7 2255 Petitioner
 8 Material Witness
 9 Other (Specify) _____

DOCKET NUMBERS

Magistrate

District Court

08CR 121

Court of Appeals

ANSWERS TO QUESTIONS REGARDING FINANCIAL PAYMENT

EMPLOYMENT Are you now employed? Yes No Am Self EmployedName and address of employer: ~~Elvin Ratliff~~

IF YES, how much do you earn per month? \$ _____

IF NO, give month and year of last employment
How much did you earn per month? \$ 2000/2200/moIf married is your Spouse employed? Yes No

IF YES, how much does your Spouse earn per month? \$ _____

If a minor under age 21, what is your Parents or Guardian's approximate monthly income? \$ _____

ASSETS OTHER INCOME Have you received within the past 12 months any income from a business, profession or other form of self-employment, or in the form of rent payments, interest, dividends, retirement or annuity payments, or other sources? Yes NoRECEIVED
IF YES, GIVE THE AMOUNT 10,000 carpentry self-employment
RECEIVED & IDENTIFY \$ _____
THE SOURCES _____

SOURCES

CASH Have you any cash on hand or money in savings or checking account Yes No IF YES, state total amount \$ _____PROPERTIES Do you own any real estate, stocks, bonds, notes, automobiles, or other valuable property (excluding ordinary household furnishings and clothing)? Yes No

VALUE

DESCRIPTION

IF YES, GIVE THE VALUE AND \$ _____
DESCRIBE IT _____

DEPENDENTS

MARITAL STATUS
 SINGLE
 MARRIED
 WIDOWED
 SEPARATED OR DIVORCED

Total
No. of
Dependents
0

List persons you actually support and your relationship to them

OBLIGATIONS & DEBTS

DEBTS & MONTHLY BILLS

(LIST ALL CREDITORS, INCLUDING BANKS, LOAN COMPANIES, CHARGE ACCOUNTS, ETC.)

APARTMENT OR HOME:
 phone
 rent
 insurance (life)
 car insurance
 food

Creditors

Total Debt

Monthly Payt.

\$	\$ 50
\$	\$ 150
\$	\$ 50
\$	\$ 38
	150

I certify under penalty of perjury that the foregoing is true and correct. Executed on (date) _____

3-6-08

SIGNATURE OF DEFENDANT
(OR PERSON REPRESENTED)

Elvin Ratliff